PTO/SB/21 (10-07)

Approved for use through 10/31/2007. OMB 0651-0031

	Under the Paperwork Reduction Act of 1995, n	persons are required to respond t	o a collection of information unless it displays a valid OMB control number
$\overline{}$		Application Number	10/824,661
	TRANSMITTAL	Filing Date	April 15, 2004
	FORM	First Named Inventor	Michael Zaşloff
		Art Unit	1616
	(to be used for all correspondence after initial filling	Examiner Name	Sabiha N. Qazi, Ph.D.
	Total Number of Pages in This Submission	Attorney Docket Num	ber 036670-5045-14

ENCLOSURES (Check all that apply)									
V	Fee Tran	nsmittal Form	Dra	wing(s)			After Allowance Communication to TC Appeal Communication to Board		
	∐ F	ee Attached	Licensing-related Papers				of Appeals and Interferences		
	Extensio Express Informati	AmendmenUReply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority		Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD			Appeal Communication to TC (Appeal Rotice, Berlis Repyl Berli) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): 1. Copy of Declaration of Kenneth J. Holroyd with Exhibits A through D. 2. Copy of article by Clavel et al.		
	Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		This response is being timely filed under the next business day rule on Monday, November 19, 2007, as the due date for responding fell on a weekend (Sunday, November 18, 2007).						
		SIGNA	TURE OF	APPLICANT, ATT	ORNEY, C	RAG	ENT		
Firm Name Morgan, Lewis & Bockius		LLP							
Signature		Down Lo	Days Lus						
Printed name		Gregory T. Lowen							
Date		November 19, 2007	November 19, 2007		Reg. No.	46,882			
_									

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below Signature

Date Typed or printed name

This collection of Information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 11.4. This collection is estimated to 2 hours to complete, including staffening, prespired, and submitting the completed application from the USPTO. Time will vary depending upon the includinal case. Any comments on the amount of time type or require to complete this form and/or suggestions for reducing this burden, should be sent to the Chef Information Chiffor, U.S. Patient and Trademark Ciffice. U.S. Department of Commence, P.G. Disk 1450, Alexandria, V.J. 22313-1450, DONT SEND FEES OR COMMETEE PORTIONS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (10-07)

Approved for use through 08/30/2010. OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction A			red to res	spond to a collection			ys a valid OMB control number	
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known					
FEE TRANSMITTAL For FY 2008				Application Number 10/824,661		·····		
				Filing Date		April 15, 2004		
				First Named Inv	entor	Michael Zasloff		
Applicant claims small entity status. See 37 CFR 1.27				Examiner Name	_	Sabiha N. Qazi, Ph.D.		
	-		\dashv	Art Unit	1616			
TOTAL AMOUNT OF PAYME	NT (\$)	310.00		Attorney Docket No. 036870-5045-14				
METHOD OF PAYMENT (heck all t	hat apply)						
Check Credit Car	d \square_{M}	loney Order	Non	e Other (p	lease ide	ntify):		
Deposit Account Depo	sit Account	Number: 50-0310		Deposit Ac	count Na	me: Morgan, Le	wis & Bockius	
For the above-identified	deposit a	count, the Directo	r is her					
✓ Charge fee(s) ind	ficated bel	ow		Charge	e fee(s)	indicated below, ex	xcept for the filing fee	
		or underpaymen	ts of fee	e(s) 🗸 Credit	any ove	rpayments		
under 37 CFR 1. WARNING: Information on this for	m may bec	7 ome public. Credit	card info				Provide credit card	
information and authorization on I	P1O-2038.							
1. BASIC FILING, SEARCH	ANDE	VAMINATION F	EEE					
	FILING F			CH FEES	EXAM	INATION FEES		
Application Type F		nall Entity		Small Entity		Small Entity	Face Bald (f)	
	310	Fee (\$) 155	Fee (\$)	1.44	Fee		Fees Paid (\$)	
•			510	255	210			
	210	105	100	50	130	05		
	210	105	310	155	160	80		
	310	155	510	255	620	310		
	210	105	0	0	0	0	***************************************	
2. EXCESS CLAIM FEES Fee Description						Fee (\$)	Small Entity Fee (\$)	
Each claim over 20 (incl Each independent claim			>			50 210	25	
Multiple dependent claim		icluding Reissuc	:s)			210 370	105 185	
	Paid (\$)		0.70	ependent Claims				
<u>Total Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u> 20 or HP = x = x						Fee (\$)	Fee Paid (\$)	
HP = highest number of total clair Indep. Claims Ex	ms paid for, tra Claim:							
- 3 or HP =	tra Claim:	<u>Fee (\$)</u>	ree_	Pald (\$)				
HP = highest number of independ		aid for, if greater tha	n 3.					
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) -100 = -100 = (round up to a whole number) x								
4 OTHER FEE(II)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): Information Disclosure Statement Fee and Terminal Disclaimer Fee \$310.00								
SUBMITTED BY								
7/1	, ,		1.5					

SUBMITTED BY						
Signature	Drody	lun	Registration No. (Attorney/Agent) 46,882	Telephone 202.739.5915		
Name (Print/Type)	Gregory T. Lowen			Date November 19, 2007		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confiderably is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gainering preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for midding intelligent process. The other information officer, U.S. Patient and Traditionals Confiderable Commenter, P.O. set 450, Alexandra V.A. 2213-14(30. ON ST SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.